Request for Translating Service

Instructions:
Complete one form for each article. Forward both copies to:
Translation Unit, NIH Library
Bldg. 10, Room 1L09J (496-2257)
Notice: A copy of the translation will be put on display in the NIH
Library, sent to the National Translations Center Archives, and kept on
file in the Translation Unit for fair use unless prohibited by the requester.

		Tile in the Translation t	Juli for fair	use unless pronibited by the requester.	
Name			Date of R	request	
ICD	Building and Room	Building and Room		Phone No.	
Signature of Approving Officer (who is author translation is essential to the research effort				Account Number written translations to be contracted out)	
Material to be Translated					
AuthNm					
Title of Article					
Name of Journal					
Vol	Issue Number	Page Numbers (inclusive)		Date of Issue	
Type of Translation Desired					
Check one ORAL (in person)	Deadline (if any) for Translation	Only written translations to be contracted out require approval by the designated approving officer and Common Account Number.			
ORAL (Recorded)		Oral service is available in French, German, Italian, Russian, and Spanish, Oral (in person) requires advance appointment.			
WRITTEN		Oral (recorded on cassette) is filled like a regular request.			
Other Instructions					

For NIH Library Use Only							
Date Received	File Checked	Requested from ILL	Received from ILL	Received from ILL			
ACTION		DATE	HOURS	DAYS			
Translated by		(Started/mailed)					
		(Completed/received)					
Reviewed by							
Returned to							
Rcvd							
Language		Special	Due Date	Due Date			
Number of Words		Routine	Maximum Charge	Maximum Charge			

NIH 75 (Rev. 5/90)